

TRANSMITTAL FORM

1c474 U.S. PTO
10/064116
06/12/02

Electronic Version 1.0.3

Stylesheet Version: 1.0

Attorney Docket
Number:

201-0910
FAM

Submission Type: Utility Patent
Filing

COLOR CORRECTED LASER ILLUMINATION SYSTEM FOR NIGHT VISION APPLICATIONS

First Named Inventor: Jeffrey Thomas Remillard

SUBMITTED BY

Organization Name:

Ford Motor Company

Name:

Saundra M. Lewis Electronic Filing
Specialist

Electronic Signature Mark: /sml

Date Signed: 20020612

I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.

I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

declaration

declaration1 of3.tif

declaration

declaration2 of3.tif

declaration
declaration
declaration
bibd-transmittal
us-information-disclosure-statement
patent-assignments
specification
fee-transmittal

declaration3of3.tif
consentletter.tif
infodisclosurestatement.tif
201-0910apds.xml
201-0910ids.xml
201-0910asgn.xml
Specification.xml
201-0910fee.xml

Attached Image File(s):

declaration1of3.tif
declaration2of3.tif
declaration3of3.tif
consentletter.tif
infodisclosurestatement.tif

10064116

Comments:

If insuffucient funds in Deposit Account 06-1510; please use Deposit Account 06-1505.

10064116.06.1202

FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Large Entity

TOTAL FEES AUTHORIZED: \$ 820

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 06-1510



Deposit Account Name: 06-1510

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

SUBMITTED BY

Authorized Name: Sandra M. Lewis

Electronic Signature Mark: /sml

Date Signed: 20020612

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 740

Subtotal For Basic Filing Fee: \$ 740

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 20	103	\$ 18	0	\$ 0
Independent Claims: 3	102	\$ 84	0	\$ 0

Subtotal For Extra Claims Fees: \$ 0

ADDITIONAL FEES

Fee Description	Number	Quantity	Fee Code	Amount	Fee Paid
Recording Each Patent Assignment Per Property Fee	00000000	1	581	\$ 40	\$ 40
Recording Each Patent Assignment Per Property Fee	00000000	1	581	\$ 40	\$ 40

Subtotal For Additional Fees: \$ 80

10064116.061202